## PART B - FEE(S) TRANSMITTAL

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FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO 10/037 674 10/22/2001 6067-41600 8284 Anders Olsson TITLE OF INVENTION: APPLN, TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV, PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE \$300 \$0 \$1510 \$1810 01/28/2010 nonprovisional NO EXAMINER ARTINIT CLASS-SUBCLASS Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 Robert C. Kowart ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 Mevertons, Hood, Kivlin, ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Kowert & Goetzel, P.C. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Adobe Systems, Incorporated San Jose, CA Please check the appropriate assignee category or categories (will not be printed on the patient): 🔲 Individual 🗷 Corporation or other private group entity 🖵 Government 4a. The following feets) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) lssue Fee A check is enclosed. Payment by credit card. Form PTO-2038 is attached. 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